APPLICATION FOR COMMERCIAL ENCROACHMENT

email to: real_estate@SLCgov.com

THIS SECT	ION TO BE FILLED O	UT BY PROPERTY OWI	NER	
PARCEL OWNER		BUS	INESS PHONE NUMBER	
CONTACT NAME	CON	CONTACT PHONE NUMBER		
PROPERTY ADDRESS		owi	OWNER/ COMPANY EMAIL	
CITY, STATE, ZIP CODE		CON	TACT EMAIL	
TENANT OR DBA: **Description for use of Property a (attach a dimensional site plan & eleva		t be submitted at the time o		
		RT (DEVELOPMENT RE	·	
DRT forms may be found at http://www.slcdocs.com/building/DRT_Application_03_29_2016.pdf				
Conditions Determined by Develor COMMENTS:	ment Review Team:			
Zoning:	Date:	Reviewed	Accepted	
Publ. Util:	Date:	Reviewed	Accepted	
Engineering:	Date:	Reviewed	Accepted	
Transportation:	Date:	Reviewed	Accepted	
Fire:	Date:	Reviewed	Accepted	
Planning (if needed):	Date:	Reviewed	Accepted	
Review and acceptance by DRT alor	n <mark>e do not constitute final a</mark>	pproval of project to obtain	an encroachment permit*	
THIS SECTION TO BE COMPLETED BY REAL ESTATE SERVICES				
Description Letter (Outline wha				
DRT Signed off				
Drawings (2) (with details ar	nd dimensional site plan or	n 8 1/2 x 11 paper)		
Certificate of Insurance				
Initial Payment Paid in Adva	nce			
Original Signed Permit or Le	ase			
OKAY to Issue: Real Estate Services has all documents on file				
OKAY to issue: Subject to				
Checked By RFS		Date		